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NAME OF SUPERVISOR OR PERSON WHO APPROVED
 THE PROPOSED RULE: Derek Helms, Program
 Administrator

DATE PROPOSED RULE APPROVED BY AGENCY
 HEAD: September 21, 2007

DATE NOTICE OF PROPOSED RULE DEVELOPMENT
 PUBLISHED IN FAW: October 5, 2007

Section III Notices of Changes, Corrections and Withdrawals

**BOARD OF TRUSTEES OF THE INTERNAL
 IMPROVEMENT TRUST FUND**

Notices for the Board of Trustees of the Internal Improvement
 Trust Fund between December 28, 2001 and June 30, 2006, go
 to <http://www.dep.state.fl.us/> under the link or button titled
 "Official Notices."

AGENCY FOR HEALTH CARE ADMINISTRATION

Medicaid

RULE NO.:	RULE TITLE:
59G-4.199	Mental Health Targeted Case Management

NOTICE OF CHANGE

Notice is hereby given that the following changes have been
 made to the proposed rule in accordance with subparagraph
 120.54(3)(d)1., F.S., published in Vol. 33, No. 36, September 7,
 2007 issue of the Florida Administrative Weekly.

These changes are in response to comments received from the
 Joint Administrative Procedures Committee.

59G-4.199(3) We added form numbers to the forms that are
 incorporated by reference. The rule text now reads as follows:
 "The following forms that are included in the Florida Medicaid
 Mental Health Targeted Case Management Coverage and
 Limitations Handbook are incorporated by reference: Agency
 Certification, Children's Mental Health Targeted Case
 Management, AHCA-Med Serv Form 022, June 2007 July
2006, in Appendix B, one page; Agency Certification, Adult
 Mental Health Targeted Case Management, AHCA-Med Serv
Form 023, June 2007 July 2006, in Appendix C, one page;
 Agency Certification, Intensive Case Management Team
 Services, Adult Mental Health Targeted Case Management,
AHCA-Med Serv Form 024, June 2007 July 2006, in
 Appendix D, one page; Case Management Supervisor
 Certification, Children's Mental Health Targeted Case

Management, AHCA-Med Serv Form 025, July 2006, in
 Appendix E, one page; Case Management Supervisor
 Certification, Adult Mental Health Targeted Case
 Management, AHCA-Med Serv Form 026, July 2006, in
 Appendix F, one page; Case Manager Certification, Children's
 Mental Health Targeted Case Management, AHCA-Med Serv
Form 027, July 2006, in Appendix G, one page; Case Manager
 Certification, Adult Mental Health Targeted Case
 Management, AHCA-Med Serv Form 028, July 2006, in
 Appendix H, one page; Children's Certification, Children's
 Mental Health Targeted Case Management, AHCA-Med Serv
Form 029, July 2006, in Appendix I, one page; Adult
 Certification, Adult Mental Health Targeted Case
 Management, AHCA-Med Serv Form 030, July 2006, in
 Appendix J, one page; Adult Certification, Intensive Case
 Management Team Services, Adult Mental Health Targeted
 Case Management, AHCA-Med Serv Form 031, July 2006, in
 Appendix K, two pages; Medicaid 30-Day Certification for
 Children's or Adult Mental Health Targeted Case
 Management, AHCA-Med Serv Form 032, June 2007 July
2006, in Appendix L, one page."

We added the following sentence at the end of subsection
 59G-4.199(3), F.A.C., to explain how the forms are obtained,
 "The forms are available by photocopying them from the
Florida Medicaid Mental Health Targeted Case Management
Coverage and Limitations Handbook."

The rule incorporates by reference update June 2007 to the
 Florida Medicaid Mental Health Targeted Case Management
 Coverage and Limitations Handbook. On Page 1-4,
 Department of Children and Families Mental Health Program
 Office Responsibilities, we added "targeted" to the sentence so
 that it reads, "The Department of the Children and Families
 (DCF), Mental Health Program Office is responsible for
 approving policy for the mental health targeted case
 management program in conjunction with Medicaid."

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Notices for the Department of Environmental Protection
 between December 28, 2001 and June 30, 2006, go to
<http://www.dep.state.fl.us/> under the link or button titled
 "Official Notices."

DEPARTMENT OF JUVENILE JUSTICE

Residential Services

RULE NOS:	RULE TITLES:
63E-3.002	Definitions
63E-3.003	Administration of the Serious or Habitual Juvenile Offender (SHO) Program
63E-3.004	Sanitation
63E-3.005	Safety and Security
63E-3.006	Continuity of Operations Planning
63E-3.007	Youth Admission

- 63E-3.008 Intake
- 63E-3.009 Orientation
- 63E-3.010 Case Management
- 63E-3.012 Youth Services
- 63E-3.014 Program Monitoring and Evaluation
- 63E-3.015 Research Projects

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 33, No. 33, August 17, 2007 issue of the Florida Administrative Weekly.

63E-3.002 Definitions.

For the purpose of this rule the following words shall have the meanings indicated.

(1) through (2) No change.

(3) Authority for Evaluation and Treatment (AET) or Authority for Evaluation and Treatment For Youth Over 18 Years of Age – The document that, when signed by a parent or guardian if the youth is under 18 years ~~old~~ ~~or younger~~ or signed by the youth if he or she is over 18 years of age, gives the department the authority to assume responsibility for the provision of necessary and appropriate physical and mental health care to a youth in the department’s physical custody. The Authority for Evaluation and Treatment (HS 002, May 2007) and the Authority for Evaluation and Treatment For Youth Over 18 Years of Age (HS 003, May 2007) are incorporated into this rule and are accessible electronically at http://www.djj.state.fl.us/forms/health_services_forms_index.html.

(4) through (5) No change.

(6) Behavior Management System – An organized system designed to promote positive behavior through the giving or taking of rewards or privileges based on youth behavior. Behavior management within the SHO program shall be based on evidence based specific techniques that have been found to be effective ~~with male offenders 13 years of age or older~~, and take into account ~~the their~~ level of cognitive ability, emotional maturity, and other personal characteristics.

(7) Case Management Process – Refers to the process a residential commitment program uses to assess a youth, develop goals to address the youth’s criminogenic risks and needs, review and report the youth’s progress, and plan for the youth’s transition to the community upon release. This process is implemented within the ~~context~~ of BARJ that focuses on accountability, competency development and community safety.

(8) through (14) No change.

(15) Designated Health Authority – The individual who is responsible for the provision of necessary and appropriate health care to youth in a residential commitment program. Individual Designated Health Authorities must be a physician (MD) or osteopathic physician (DO) holding who holds a clear

and active license pursuant to Chapter 458 or Chapter 459, F.S., respectively, and meeting all requirements to practice independently in the State of Florida.

(16) No change.

(17) Direct-Care Staff – An employee whose primary job responsibility is to provide care, custody, and control of youth admitted ~~committed~~ to the facility. This definition includes those who directly supervise staff responsible for the daily care, custody, and control of youth.

(18) No change.

(19) Evidence-based Treatment and Practices – Treatment and practices, which have been independently evaluated and found to reduce the likelihood of recidivism or at least two criminogenic needs, with a juvenile offending population. The evaluation must have used sound methodology, including, but not limited to, random assignment, use of control groups, valid and reliable measures, low attrition, and appropriate analysis. Such studies shall provide evidence of statistically significant positive effects of adequate size and duration. In addition, there must be evidence that replication by different implementation teams at different sites is possible with similar positive outcomes.

(20) through (24) No change.

(25) Institutional Review Board (IRB) – The department’s IRB reviews research proposals that seek access to departmental records or youth in the department’s care, custody, or under the department’s supervision. The board reviews ~~looks at~~ all aspects of a research proposal and evaluates potential risks and benefits to participating juveniles and the department, as well as the researcher’s plan to diminish risks. Based on this evaluation, ~~t~~he IRB makes recommendations to the department’s Secretary or his or her designee ~~administration~~ who then decides whether or not the proposal is approved.

(26) No change.

(27) Jimmy Ryce Act for Violent Sexual Offenders – Residential Program Notification Checklist – The checklist sent, along with supporting documents, to the youth’s JPO to be reviewed by the Department of Children and Families Services to determine eligibility for civil commitment as a sexually violent predator pursuant to Sections 394.910-932, F.S. The checklist (DJJ/BCS Form 23) dated February 2005, is incorporated by reference and is accessible electronically at http://www.djj.state.fl.us/forms/residential_rule63E_forms.htm.

(28) No change.

(29) Juvenile Probation Officer (JPO) – A Juvenile Probation Officer (JPO) is an employee of the department responsible for the intake of youth upon arrest and the supervision of youth on court ordered supervision in the community. The JPO serves as the primary case manager for the purpose of managing, coordinating and monitoring the services provided and sanctions required for each youth. In this rule chapter, whenever a reference is made to the objectives

and duties of a JPO it shall also apply to case management staff of a provider agency contracted to perform these duties and objectives. The officer responsible for the direct supervision of a youth in the community or on post-commitment probation or conditional release.

(30) through (31) No change.

(32) Orientation – The process that commences ~~occurs~~ within 24 hours of the youth's admission whereby facility staff inform the youth of the rules, expectations, services, and goals of the residential program.

(33) Performance Plan – An individualized plan developed by the treatment team and youth that stipulate measurable goals the youth must achieve prior to release from the program. Performance plan goals are based on the prioritized needs identified during assessment of the youth and may be updated as appropriate. The plan identifies the youth's and staffs' responsibilities and the timelines associated with completion of each goal. The performance plan also serves as the basis for the youth's post-residential services plan since it includes the transition goals and activities identified at the transition conference conducted at least 60 days, or 90 days for youth who are sex offenders, prior to the youth's anticipated release.

(34) through (37) No change.

~~(38) Program – A contracted or state-operated residential or non-residential environment providing supervision of youth who have been identified to receive services within the community. This includes, but is not exclusively limited to, non-secure detention, home detention, Intensive Delinquency Diversion Services (IDDS) programs, conditional release programs, screening and intake units, and day treatment programs.~~

~~(38)(39) Program Director – The on-site administrator of a residential commitment program for juvenile offenders, whether state or privately operated; who is accountable for the on-site operation of the program.~~

~~(39)(40) Protective Action Response (PAR) – The department-approved verbal and physical intervention techniques and the application of mechanical restraints used in accordance with Chapter 63H-1, F.A.C.~~

~~(40)(41) Protective Action Response Certification – Certification awarded to an employee who has successfully completed PAR training as described in this rule. Only employees who are PAR certified are authorized to use PAR.~~

~~(41)(42) Qualified Researcher – As defined for this rule is any person who has been approved through the department's Institutional Review Board (IRB) proposal process to conduct a research project with youth in the care, custody and supervision of the department.~~

~~(42)(43) Sexually Violent Predator (SVP) – As defined in Section 394.912, F.S. For purposes of this chapter of this rule, SVP eligible refers to a youth being subject to the requirements of Sections 394.910-.932, F.S.~~

~~(43)(44) Safety and Security Coordinator – The person responsible for the oversight of the facility's safety and security program which includes, but is not limited to: facility security, fire safety and awareness, disaster preparedness, and the oversight of equipment and tool management within the facility.~~

~~(44)(45) Sick Call Care – The health care delivery system component intended to provide care in response to episodic complaints of illness or injury of a non-emergency nature.~~

~~(45)(46) Temporary Release – Any court-approved period of time during which an eligible youth is allowed to leave a residential program without the direct supervision of program staff or properly screened and trained interns or volunteers. The purpose of temporary release activities is to provide youth with opportunities to develop skill competencies and prepare for transition upon release or discharge from the program. Examples of temporary release include, but are not limited to, home visits and community employment.~~

~~(46)(47) Transfer – The movement of a youth from one residential program to another, at the same restrictiveness level, a lower restrictiveness level, or a higher restrictiveness level.~~

~~(47)(48) Transition Conference – A conference conducted at least 60 days, or 90 days for youth who are sex offenders, prior to a youth's anticipated release at which the youth, residential staff, the youth's JPO and/or post-residential service provider, the youth's parent(s) or guardian(s), and other pertinent parties establish transition activities, responsibilities, and timelines necessary for the youth's successful release and reintegration into the community.~~

~~(48)(49) Transition Planning – The process of establishing transition activities to facilitate a youth's successful release and reintegration into the community.~~

~~(49)(50) Treatment Team – A multidisciplinary team consisting of representatives from the program's administrative, educational, vocational, residential, medical, mental health, substance abuse, and counseling components which assesses each youth to identify his needs and risk factors, develop rehabilitative treatment goals, ensure service delivery, and assesses and reports the youth's progress. The youth is a member of the treatment team.~~

~~(50)(51) Victim Notification of Release – Unless victim notification rights have been waived, a letter that a residential commitment program sends to the victim, or the next of kin in cases of homicide, or the parent or legal guardian in cases involving minor victims, prior to any discharge or release, including a temporary release, of a youth whose committing offense meets the criteria for victim notification pursuant to Chapter 960, F.S. This form (RS 011, dated September 2006) is incorporated into this rule and is accessible electronically at http://www.djj.state.fl.us/forms/residential_rule63E_forms.htm.~~

Specific Authority 985.47, 985.64 FS. Law Implemented 985.47 FS. History--New _____.

63E-3.003 Administration of the Serious or Habitual Juvenile Offender (SHO) Program.

A SHO program for youth at least 13 years of age at the time of disposition for the current offense shall include the following:

(1) A treatment modality for youth that includes evidence-based treatment and practices of changing negative or inappropriate behavior and promotes positive pro-social behavior;

(2) A ~~Program Director on-site administrator~~ who is accountable for the daily operation of the program. The Program Director ~~This administrator~~ is ultimately responsible for ongoing program planning and evaluation to ensure the integrity, safety, security, and effective operation of the program;

(3) A facility management team established by the ~~Program Director on-site administrator~~ that will meet at least monthly to discuss the ongoing operational issues of the program, strategize resolution of problems and ensure contract compliance;

(4) A Program Director who is responsible for ensuring that the daily operations of the program are conducted in a manner that provides a positive quality of life for the youth. Each program shall consist of at least 9 months of intensive secure residential treatment and will not exceed the maximum term of imprisonment that an adult may serve for the same offense. Conditional release assessment shall be provided in accordance with s. 985.46. The components of the program shall include, but not be limited to:

- (a) Shelter;
- (b) Security and Safety;
- (c) Clothing;
- (d) Food;
- (e) Process to address youth grievances;
- (f) Access to the Abuse Hotline, and/or Central Communications Center;
- (g) Diagnostic evaluation services;
- (h) Appropriate treatment modalities, including substance abuse intervention, mental health services, and sexual behavior dysfunction interventions and gang-related behavior interventions;
- (i) Prevocational and vocational services;
- (j) Job training, job placement, and employability-skills training;
- (k) Case Management Services;
- (l) Educational services, ~~including special education services for youth with disabilities and pre-GED literacy;~~
- (m) Self-sufficiency planning;
- (n) Independent living skills;
- (o) Parenting skills;
- (p) Recreational and leisure time activities to include large muscle exercise;

(q) Community involvement opportunities commencing, where appropriate, with the direct and timely payment of restitution to the victim;

- (r) Graduated reentry into the community;
- (s) A diversity of forms of individual and family treatment appropriate to and consistent with the child's needs;
- (t) Consistent and clear consequences for misconduct;
- (u) Opportunities for expression of religious beliefs;
- (v) Family visitation;
- (w) Access to incoming mail and opportunities to send outgoing mail; and
- (x) Telephone access.

(5) Pre-employment screened employees (Level 2) pursuant to Chapter 435 and Section 985.644(5), F.S., and as set forth in Chapter 63H-2, F.A.C.;

(6) Orientation training in accordance with job responsibilities within the first 15 days of employment as set forth in Chapter 63H-2, F.A.C. This training, at a minimum shall include:

- (a) The Department's mission and how the program fits and interacts within the overall continuum of care;
- (b) The Program's mission, philosophy and treatment approach;
- (c) The program rules and the behavior management system;
- (d) Personnel policies;
- (e) Job responsibilities;
- (f) Confidentiality (Section 985.04, F.S.);
- (g) Introduction to safety and security issues;
- (h) Child abuse reporting (as defined in Chapters 39 and 827, F.S.);
- (i) Central Communication Center Incident reporting; and
- (j) Professional Ethics issues and employee standards of conduct, including disciplinary and legal consequences for noncompliance with departmental or facility rules.

(7) Direct-care employees who are certified in Protective Action Response (PAR) within 90 days of hire. Staff who are not PAR certified may provide direct-care supervision of youth only if directly supervised by a PAR certified staff as set forth in Chapter 63H-1, F.A.C.

Specific Authority 985.47(10), 985.64 FS. Law Implemented 985.47(10) FS. History--New _____.

63E-3.004 Sanitation.

- (1) through (2) No change.
- (3) Biohazardous waste shall be disposed of in accordance with OSHA Standard 29 CFR 1910.1030 (Amended 1-1-2004). Youth shall not be allowed to clean, handle, or dispose of any other person's biohazardous material, bodily fluids or human waste.
- (4) No change.

Specific Authority 985.47, 985.64 FS. Law Implemented 985.47 FS. History--New _____.

63E-3.005 Safety and Security.

(1) No change.

(2) Physical security features for a SHO program shall meet the requirements the department has established for programs designated as high-risk. The required physical security features for newly constructed facilities include a security fence of at least 12 feet in height with an inside overhang or razor wire; electronic door locks with manual override on entry, exit, and passage doors; a closed circuit video taped television surveillance system with inside and outside cameras; a sally port with intercom; an electric or manual secure pedestrian gate with intercom capability; secure windows that are break-resistant or screened glass; sleeping room doors that open outward; exterior security lighting; electronic search equipment; and radio or cell phone communication devices for staff.

(3) through (4) No change.

(5) The program shall maintain strict control of flammable, poisonous, and toxic items. At a minimum, the program shall:

(a) Maintain a complete inventory of all such items used in the facility.

(b) Maintain a current list of personnel identified by position title or function, who are authorized to handle these items.

(c) Not allow youth to handle these items and restrict their access to areas where these items are being used.

(d) Dispose of hazardous items and toxic substances or chemicals in accordance with Occupational Safety and Health Administration (OSHA) standards (OSHA Standard 29 CFR 1910.1030 (Amended 1-1-2004)).

(e) Maintain Material Safety Data Sheets (MSDS) on site as required by OSHA (OSHA Standard 29 CFR 1910.1030 (Amended 1-1-2004)).

Specific Authority 985.47, 985.64 FS. Law Implemented 985.47 FS. History--New _____.

63E-3.006 Continuity of Operations Planning.

(1) The Program Director shall oversee the development of a Continuity of Operations Plan (COOP). The intent is for each program to have a planned and comprehensive approach to effectively manage emergencies and disaster events, including those that require the program to re-locate its youth and staff while maintaining operations, safety, and security. The program's COOP shall:

(a) through (d) No change.

(e) Indicate essential or key personnel (designated by the Program Director) who, due to their position and/or training, are responsible during an emergency or disaster for ensuring

that the program remains operational and responsive to the needs of the youth, as well as continuing to ensure the safety of youth, staff, and the public;

~~(f) Be compatible with or combined with the program's COOP;~~

~~(f)(g) Be compatible with the department's Residential Region's Disaster Plan and its COOP.~~

(2) No change.

Specific Authority 985.47, 985.64 FS. Law Implemented 985.47 FS. History--New _____.

63E-3.007 Youth Admission.

(1) through (2) No change.

(3) If the JPO or JPO supervisor does not provide any missing core documents upon request, a residential commitment program may elect to not admit a youth, thereby rejecting the youth. However, within two hours of a decision to reject a youth, the program shall notify the Regional Director for Residential and Correctional Facilities and the Regional Director for Probation and Community Intervention of this action. The youth continues his or her status of awaiting residential placement while the department immediately pursues acquisition or production of the missing core documents, thereby expediting the youth's subsequent admission to the residential commitment program.

(4) A residential commitment program shall communicate internally as follows:

(a) Program staff responsible for admission are notified when a new admission is scheduled to arrive and the youth's name, date and time of anticipated arrival, mode of transportation, medical and mental health needs, and any safety or security risks are documented in the logbook.

(b) Regardless of the youth's condition upon admission, the designated health authority is notified of an admission with any of the following medical problems documented in the commitment packet: asthma; allergies with anaphylaxis; adrenal insufficiency; cancer or history of cancer; cardiac arrhythmias, disorders or murmurs; congenital heart disease; cystic fibrosis; developmental disability/mental retardation; diabetes; history of EpiPen use; eating disorders; head injuries that occurred within the two weeks prior to admission; hearing, speech or visual deficits; hemophilia; hepatitis; human immunodeficiency virus (HIV) or AIDS, hypo or hyperthyroidism, hypertension; inflammatory bowel disease; kidney failure (with or without dialysis); neuromuscular conditions; pregnancy or having given birth within the two weeks prior to admission; seizure disorders; sickle cell anemia; scoliosis; sickle cell trait; spina bifida; systemic lupus erythematosus; and active tuberculosis.

(c) Residential staff will note any existing documentation of mental health or substance abuse problems, needs or risk factors and report the documentation to appropriate clinical and administrative staff.

(d)(e) Information included in the commitment or transfer packet is distributed to program staff as their job functions dictate.

(5) Within 24 hours of admission, a residential commitment program shall refer to the department's Office of General Counsel ~~circuit legal counsel~~ any commitment order appearing to be in conflict with Chapter 985, F.S., or legally insufficient ~~otherwise questionable~~. The program shall maintain documentation of the referral.

(6) No change.

(7) Although it is the intent that deoxyribonucleic acid (DNA) samples be collected prior to a youth's admission to a residential commitment program, if a youth who meets the DNA testing criteria per Section Chapter 943.325 F.S., is admitted to the facility without DNA testing, the program shall contact Florida Department of Law Enforcement (FDLE) to verify whether or not a DNA sample is on file for the youth. If not, the program shall collect DNA samples, using the test kit and accompanying instructions provided by FDLE, submit them to FDLE no later than 45 days prior to a youth's release, and document these actions in the youth's individual management record.

(8) No change.

Specific Authority 985.47, 985.64 FS. Law Implemented 985.47 FS. History—New _____.

63E-3.008 Intake.

(1) No change.

(2) The following entry screenings shall be completed immediately upon a youth's admission to a program. These screenings are used to ensure that the youth has no emergency medical, mental health, or substance abuse conditions of a nature that render admission unsafe.

(a) No change.

(b) The Mental Health Screening may be conducted by non-clinical program staff responsible for youth intake. This screening is conducted to identify mental health needs requiring attention. Either the MAYSI-2 or clinical mental health and clinical substance abuse screening must be administered upon each youth's admission to a residential commitment. Direct care staff trained in its administration may conduct MAYSI-2 screening. Clinical mental health screening must be conducted by a licensed mental health professional and clinical substance abuse screening must be conducted by a qualified substance abuse professional as defined in Section 397.311(25)(24), F.S., and in accordance with subsection 65D-30.003(15), F.A.C. (12-12-05), using valid and reliable screening instruments.

(c) No change.

(3) Unless a youth is being admitted into a program directly from secure detention, a correctional facility, or another program, a shower, including shampooing hair, is required.

(a) An ectoparasiticide or an ovicide may be used routinely for all new admissions if the program's designated health authority deems it appropriate, if it is used in accordance with current guidelines, and if it is not contraindicated for medical or health reasons. In the absence of such a routine protocol approved by the designated health authority, an ectoparasiticide and an ovicide shall not be routinely used, and shall be used only if an infestation with lice or scabies is present and use is ordered by the designated health authority, is in accordance with current guidelines, and is not contraindicated.

(b) Two staff of the same gender as the youth shall supervise the newly admitted youth during this shower.

(4) No change.

(5) A residential commitment program shall inventory each youth's personal property upon admission and document the inventory by listing every item. Program staff shall immediately secure in a locked area all money, jewelry and other items of value. After all personal possessions have been inventoried and documented, the staff conducting the inventory, the youth, and a witness shall sign and date the documentation to attest to its accuracy. The program shall:

(a) through (c) No change.

(d) Send inventoried property to the youth's home, have the youth's parents or legal guardians retrieve the youth's property or store such property until the youth's release from the program.

(6) through (7) No change.

(8) Based on a review of all documentation and interactions with the youth, the Program Director or designee shall make an initial classification of the youth for purposes of room or living area assignment within the program. To determine the offender's risk of escape, the program shall use, at a minimum, the Predisposition Report and face sheet in the Juvenile Justice Information System (JJIS) to secure information about the youth's past history of escapes and escape attempts. Assignment to a group or staff advisor shall also be based on this initial classification. If the program has an orientation unit that houses newly admitted youth, a copy of the classification form shall be sent to the orientation unit. Factors to consider, for the safety and security of youth and staff, when classifying the youth shall include, but are not limited to:

- (a) Sex;
- (b) Age;
- (c) Size;
- (d) Emotional maturity;
- (e) Gang affiliation;
- (f) Medical or mental health problems;
- (g) History of violence;
- (h) Sexual aggression;
- (i) Predatory behavior;

- (j) Risk of escape and risk to the public; and
- (k) Skill levels.
- (9) No change.

(10) The program shall ensure that a current photograph and critical information are obtained and easily accessible for use in verifying the youth’s identity as needed during his stay in the program. The program shall ensure that a current photograph of each youth is maintained in the individual management record and the individual healthcare record. A photograph shall be made available to law enforcement or other criminal justice agencies to assist in apprehending the youth in the event of escape. The program may store this critical information electronically, however, a hard copy of the information on each youth shall be maintained in an administrative file that is easily accessible and mobile in the event of an emergency situation that results in the program having to relocate quickly or in the event the information is needed when the computer is inoperative. The critical information shall include, but not be limited to, the following:

- (a) Youth’s full name, ~~Social Security number~~, and DJJ ID number;
- (b) through (n) No change.
- (11) No change.

Specific Authority 985.47, 985.64 FS. Law Implemented 985.47 FS. History–New _____.

63E-3.009 Orientation.

(1) Youth admitted to the SHO program shall commence ~~receive~~ orientation to the program within 24 hours of admission.

- (2) Orientation to the program shall include the following:
 - (a) through (g) No change.

(h) Program’s youth grievance procedures. A residential commitment program shall establish written procedures specifying the process for youth to grieve actions of program staff and conditions or circumstances in the program related to the violation or denial of basic rights. These procedures shall establish each youth’s right to grieve and ensure that all youth are treated fairly, respectfully, without discrimination, and that their rights are protected. The procedures shall address each of the following phases of the youth grievance process, specifying timeframes that promote timely feedback to youth and rectification of situations or conditions when grievances are determined to be valid or justified. A programs grievance process shall have the following components:

1. Informal phase wherein the youth attempts to resolve the complaint or condition with staff on duty at the time of the grieved situation;
2. Formal phase wherein the youth submits a written grievance that requires a written response from a supervisory staff person; and

3. Appeal phase wherein the youth may appeal the outcome of the formal phase to the program director or designee.

4. Program staff shall be trained on the program’s youth grievance process and procedures.

5. Program staff shall explain the grievance process to youth during their program orientation and shall post the written procedures throughout the facility for easy access by youth.

6. Youth shall be given free access to grievance forms and accompanying instructions and program staff shall assist a youth in filing a grievance if needed.

7. The program shall maintain documentation on each youth grievance and its outcome for at least one year. The one-year period begins when the youth submits a written grievance that requires a written response from a supervisory staff person.

- (i) through (l) No change.

Specific Authority 985.47, 985.64 FS. Law Implemented 985.47 FS. History–New _____.

63E-3.010 Case Management.

- (1) through (8) No change.

(9) Performance summaries shall be completed every 90 days beginning 90 days from the signing of the youth’s performance plan, unless the committing court requests monthly performance summaries, in which case the performance summary shall be completed every 30 days beginning 30 days following completion of the performance plan. Areas that shall be addressed in the performance summary include, but are not limited to:

- (a) through (c) No change.
- (d) The youth’s overall behavior adjustment; for youth receiving mental health or substance abuse services, their progress shall be addressed in a manner that complies with the confidentiality requirements set forth in state ~~and federal~~ statute Section 985.04, F.S.;
- (e) Significant incidents (positive or negative); and
- (f) The justification for a request for release, discharge or transfer, if applicable.

(10) The staff member who prepared the summary, the treatment team leader, the Program Director or designee, and the youth shall review, sign and date the Performance Summary. Program staff shall give the youth the opportunity to add comments to the Performance Summary prior to signing it. Within 10 working days the program shall distribute the performance summary to the:

- (a) Committing court,
- (b) Youth’s JPO,
- (c) The youth;
- ~~(d)(e)~~ Parents or guardians; and
- ~~(e)(d)~~ Other pertinent parties.

(11) If the Performance Summary is the notification of the program's intent to release or discharge a youth, the residential program shall send the original of the release or discharge summary, together with the Pre-Release Notification and Acknowledgement form, to the youth's JPO (rather than directly to the court). The program shall place the original performance summaries and copies of the youth's release or discharge summary and the Pre-release Notification form in the youth's individual management record.

(12) Transition Planning. The program shall begin planning for the youth's transition back to the community upon admission to the program. It is critical that all parties involved with the youth communicate with each other on a regular basis to ensure information is transferred in a timely manner, and job tasks related to the youth's transition are assigned and completed within the designated timeframes.

(a) The residential commitment program is responsible for the timely notification of a youth's release from the program to the youth's JPO, the youth, and other pertinent parties. Pre-Release Notification and Acknowledgement Notification of Release form shall be sent to the youth's JPO at least 45 days prior to the youth's targeted transition date (90 days prior for sex offenders). No section of this form can be left blank and all arrangements made for the youth must be clearly stated on this form.

(b) through (d) No change.

(13) No change.

Specific Authority 985.47(10), 985.64 FS. Law Implemented 985.47(10) FS. History--New _____.

63E-3.012 Youth Services.

(1) through (3) No change.

(4) Participation in the educational program is mandatory for students of compulsory school-attendance age, as defined in Section. 1003.21, F.S. For programs operated by private providers, the school district may provide educational services directly or may contract with a private provider to deliver its own educational program. Youth identified with disabilities, as defined by IDEA, will have an Individualized Education Plan developed and implemented according to the individual needs of the youth.-

(5) The educational program at the SHO program shall establish an educational and prevocational training component appropriate for all youth and consistent with the Sunshine State Educational Standards (Section 1003.41, F.S. and Rule 6A-1.09401, F.A.C.). ~~juvenile justice education standards. that includes:~~

~~(a) Basic Achievement Skills Inventory (BASI) or other common assessment tools identified by the Florida Department of Education;~~

~~(b) Performance plan goals (student outcomes) focused on post-placement needs. Based on the student assessment and identification of youth's needs, performance goals~~

~~(educational, prevocational training outcomes) must be developed in conjunction with the youth. Performance goals must target educational and prevocational services that will assist the youth in acquiring the skills most needed to increase success upon release from the residential program to the community;~~

~~(c) Educational and vocational curricula that are approved by the local school district, reviewed and revised at least annually and as needed based on skill acquisition demonstrated by youth in pre testing and post testing.~~

~~(d) Educational staff that are qualified, competent and trained in the residential program's philosophy, treatment approach(es), behavior management system, and other treatment components of the program, as well as program safety and security procedures. They shall be trained specifically on how to work effectively with the program's population. Staff shall also be trained in how to integrate support services with instruction and funding procedures for accessing resources. Educational staff shall receive in-service training in areas including but not limited to instructional delivery, understanding youth behavior and learning styles, and processes and procedures commonly used in juvenile justice educational programs.~~

~~(e) The testing and provision of special education services to youth requiring these services.~~

(6) through (7) No change.

(8) Programs allowing youth to participate in water related activities shall have a water safety plan, which is to be reviewed and approved annually by the program monitor, which at a minimum, shall address the following:

~~(a) Age and maturity of the youth who will participate;~~

~~(b) Identification of swimmers and non swimmers;~~

~~(c) Special needs youth;~~

~~(d) Type of water in which the activity is taking place (pool or open water);~~

~~(e) Water conditions (clarity, turbulence, etc.);~~

~~(f) Bottom conditions;~~

~~(g) Lifeguard to youth ratio and positioning of lifeguards; and~~

~~(h) Equipment needed for the activity.~~

(9) No change.

(10) The Program Director shall ensure access to and the provision of necessary and appropriate physical health care services to all youth committed to the program. The health care delivery system shall include the following components:

(a) through (i) No change.

(11) The SHO program shall have a Designated Health Authority defined as the physician (MD or DO licensed pursuant to Chapter 458 or 459, F.S.) who shall be a state employee or contract physician with the appropriate training and knowledge to be accountable for ensuring the delivery of administrative, managerial and medical oversight of the

~~facility's healthcare system by agreement, employment, contract or other arrangement, provides and/or supervises other medical professionals or paraprofessionals in the provision of health care within the facility.~~

(12) The Program Director shall ensure access to and provision of mental health services to all youth committed to the program. The mental health care delivery system shall include the following components:

(a) through (f) No change.

(g) A Designated Mental Health Authority will be accountable to the Program Director for ensuring that mental health services are appropriately provided in the SHO. This person shall be a licensed mental health professional (psychiatrist licensed pursuant to Chapter 458 or 459, F.S., psychologist licensed under Chapter 490, F.S., mental health counselor, clinical social worker or marriage and family therapist licensed under Chapter 491, F.S., or a psychiatric nurse as defined in Section 394.455(23), F.S.). A licensed mental health professional shall provide directly supervise clinical-oversight to unlicensed mental health staff.

Specific Authority 985.47(10), 985.64 FS. Law Implemented 985.47(10) FS. History–New _____.

63E-3.014 Program Monitoring and Evaluation.

(1) No change.

(2) Security Audit. The DJJ region's ~~security monitor~~ shall conduct an audit of the programs safety and security measures at least annually. The program shall develop a corrective action plan as instructed by the regional security monitor to address any non-compliance issues identified in the security audit report. If the region ~~security monitor~~ performs a Pre-Operational and Post-Operational Review or Quality Assurance program audit, that may be substituted as the annual security audit.

(3) through (4) No change.

(5) Pursuant to Section 985.632, F.S., the department shall conduct quality assurance reviews of residential commitment programs. Standards and indicators used for this purpose shall be based on provisions of this rule chapter. In some cases where federal funds are involved, audits may be conducted according to federal requirements. Other reviews or audits may be required per contract or departmental policy or as determined necessary by the department. For example, a Program Administrative Review may be conducted in a program by designated regional staff when DJJ headquarters determines a more detailed review of an incident is required. Also, an investigation may be conducted by the DJJ Inspector General's staff when determined necessary. In addition, there may be inspections or reviews required locally, for example, by the county.

(6) The program shall cooperate with any review or investigation coordinated or conducted by the department's Office of the Inspector General pursuant to Section 20.055,

F.S. Based on the findings of a quality assurance review, the program shall develop and implement an outcome-based corrective action plan.

Specific Authority 985.47(8), (11), 985.64 FS. Law Implemented 985.47(8), (11) FS. History–New _____.

63E-3.015 Research Projects.

(1) For purposes of this section, research is defined as a systematic investigation designed for the gathering and analysis of information to develop or contribute to generalized knowledge. Research proposals from researchers within the department and from other institutions are subject to the department's Institutional Review Board (IRB) Process and must be approved in writing by the DJJ Secretary or designee prior to its implementation, including contact with youth or access to youth records for the purposes of such research. Proposals or requests that are not subject to the department's IRB process include: All research project requests must follow be submitted to the department's Institutional Review Board Research Proposal Review Process, prior to any contact with youth. The Institutional Review Board Research Proposal Review Process is the evaluating body procedure the department utilizes to accept or deny research projects submitted to the department for consideration. The membership of the Institutional Review Board process consist of employees from all branches and units in the department who review proposed research designs to be conducted at DJJ sites. The IRB is chaired by staff from the department's Bureau of Research and Data.

(a) Requests from state and federal government agencies for existing data and information collected by the department for program management and evaluation purposes if they are to be used for the same purposes by the requesting agencies and a data sharing agreement exists between the aforementioned entities;

(b) Research and evaluation deemed necessary by the department for program management and reporting and conducted by the department's unit specifically designated to conduct research and evaluation activities;

(c) Data collection and data analysis conducted by any department unit for purposes of program management and reporting on their daily operations;

(2) The recommendation of the IRB for approval of a research proposal shall be based on: No research project involving contact with youth or access to confidential information is authorized without the department's IRB and the Secretary's permission. Prior to any research project involving youth in the department's custody, the research project's lead researcher shall obtain permission from the youth and the youth's parents or legal guardian.

(a) The likelihood that the research will not cause harm to the subjects;

(b) The requester’s plan to seek informed assent from each perspective participant and consent from his or her legally authorized representative and to provide supporting documentation of acquired assent and consent;

(c) The requester’s plan to take adequate precautions to protect the privacy and confidentiality of subjects and their information;

(d) The support from the residential commitment programs to serve as research sites;

(e) A determination that the associated workload for departmental staff will not interfere with their capacity to perform regularly assigned job functions; and

(f) The potential of the research to provide the department and other juvenile justice stakeholders with information that can be used to improve services to youth or otherwise reduce juvenile delinquency.

(3) The principal investigator, meaning the person who requested the IRB to review the research proposal and who is conducting and/or directing the research project, shall ensure any department approved research project is implemented as approved by the department. The principal investigator shall secure authorization from the IRB prior to implementing any changes in the approved research design and methodology. Additionally, the principal investigator shall report any anticipated and unanticipated problems and changes involving risk to subjects and others to the IRB director for review. Any violation or deviation from IRB requirements, approved research protocol, or human subjects may result in termination of departmental approval. The principal investigator of any research project shall meet the department’s definition of a qualified researcher as defined by this rule.

(4) The principal investigator shall submit a copy of the final report published on the authorized research project to the department for review at least 90 days prior to its submission for publication.

(5) A residential commitment program shall not permit commencement of any research project in or associated with the program without an IRB letter of approval signed by the department’s Secretary or designee.

Specific Authority 985.47(11), 985.64 FS. Law Implemented 985.47(11) FS. History–New _____.

DEPARTMENT OF JUVENILE JUSTICE

Residential Services

RULE NOS.:	RULE TITLES:
63E-6.002	Definitions
63E-6.003	Admission Criteria
63E-6.006	Program Components
63E-6.012	Residential Substance Abuse Treatment Overlay Services

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 33, No. 35, August 31, 2007 issue of the Florida Administrative Weekly.

63E-6.002 Definitions.

(1) through (6) No change.

(7) Intensive Mental Health Treatment – treatment for:

(a) through (d) No change.

(e) Youth who have a behavior history of sexual offending deviancee.

(8) through (14) No change.

Specific Authority 985.4891, 985.645 FS. Law Implemented 985.4891 FS. History–New 11-19-06, Amended _____.

63E-6.003 Admission Criteria.

(1) No change.

(2) All youth referred to the STAR program shall be screened by the department to determine if they have the physical, psychological and substance abuse profile conducive to successfully completing the rigorous physical aspects and intensive behavioral management inherent in a STAR program. The screening shall include:

(a) through (b) No change.

(c) A preadmission comprehensive evaluation with the psychological component conducted by a licensed mental health professional or a Master’s level mental health clinical staff person working under the direct supervision of a licensed mental health professional should be completed no more than six months prior to referral to the STAR program. A mental health clinical staff person is a person providing mental health services for DJJ involved youth who has received training in mental health assessment processes and procedures and mental health treatment strategies and techniques. A Master’s level mental health clinical staff person is a person who holds a Master’s degree from an accredited university or college with a major in psychology, social work, counseling or related human services field. Related human services field is one in which major course work includes the study of human behavior and development, counseling and interviewing techniques, and individual, group or family therapy. Licensed mental health professional means a board certified psychiatrist licensed pursuant to Chapter 458, F.S., a psychologist licensed pursuant to Chapter 490, F.S., a mental health counselor, clinical social worker or marriage and family therapist licensed pursuant to Chapter 491, F.S., or a psychiatric nurse as defined in Section 394.455(23), F.S. This evaluation must be completed prior to admission to screen out those youth whose mental status requires psychotropic medication interventions, who have a developmental disability as defined by an IQ less than 75 or classification as “Educable Mentally Handicapped” or “Intellectual Disabilities,” a need for intensive mental health

treatment, reveals suicidal risk histories, a DSM-IV-TR diagnosis of substance abuse, substance dependence, poly substance dependence, substance intoxication or substance withdrawal, or indicates high-risk suicidal tendencies or history of self-injurious behavior. Youth diagnosed with substance abuse or substance abuse dependence disorders may be considered for placement if the STAR program has been designated by the Department as meeting the requirements to provide residential substance abuse treatment overlay services (RSAT Overlay Services) pursuant to Rule 63E-6.012, F.A.C.

(3) No change.

Specific Authority 985.4891, 985.645 FS. Law Implemented 985.4891(2), (7)(a) FS. History—New 11-19-06, Amended_____.

63E-6.006 Program Components.

(1) The STAR program shall contain the following program components or services:

(a) through (d) No change.

(e) Mental health and substance abuse counseling and services shall be provided, including alcohol and other drug abuse awareness, education, treatment or referral to treatment for youth in need of such services. If a STAR program is designated for residential substance abuse treatment overlay services (RSAT Overlay Services), the STAR program must provide those services in accordance with Rule 63E-6.0012, F.A.C.

(f) No change.

(2) No change.

Specific Authority 985.4891, 985.645 FS. Law Implemented 985.4891(3), (4) FS. History—New 11-19-06, Amended_____.

63E-6.012 Residential Substance Abuse Treatment Overlay Services.

(1) No change.

(2) Residential Substance Abuse Treatment Overlay Services (RSAT Overlay Services), are defined as: substance abuse assessments; substance abuse education; substance abuse treatment activities such as substance abuse counseling, skills training (e.g., substance refusal skills, coping skills, interpersonal problem solving skills) and relapse prevention. These services shall provided as follows:

(a) Provided for youths with a diagnosed Substance-Related Disorder and functional impairment associated with substance abuse or substance dependence. The youth may also have a co-occurring mental disorder other than those mental disorders identified in subsection 63E-6.002(6), F.A.C. However, substance abuse must be the primary disorder. Substance abuse services ~~in DJJ facilities~~ must be provided in accordance with subsection 65D-30.003(15), F.A.C. (12-12-05).

(b) Clinical Staffing Requirements:

1. Designated Mental Health Authority- The provider shall designate a single licensed mental health professional as the Designated Mental Health Authority. The role and function of the Designated Mental Health Authority shall be clearly articulated in a written agreement between the Provider and the Designated Mental Health Authority. There must be clear organizational lines of authority and communication between the Designated Mental Health Authority and the clinical staff who are delivering on-site mental health and substance abuse services in the program.

2. Qualified Professional – must be on-site at least five days per week wherein services are provided under Chapter 397 licensure as specified in paragraph 65D-30.003(15)(a) or (b), F.A.C. (12-12-05).

3. Substance Abuse Clinical Staff: A substance abuse clinical staff person must be on-site 7 days of the week in facilities where services are provided under Chapter 397 licensure as specified in paragraph 65D-30.003(15)(a) or (b), F.A.C. (12-12-05). A substance abuse clinical staff must be on-site each day Substance Abuse Overlay Services are billed.

4. Licensed Qualified Professional~~z~~ must be on-site daily (7 days of the week) in DJJ facilities that are not licensed under Chapter 397, F.S., or where services are not provided by a service provider licensed under Chapter 397, F.S. The licensed qualified professional must be on-site and provide a substance abuse service each day Substance Abuse Overlay Services are billed.

5. Psychiatrist – must be on-site bi-weekly for consultation, medication management and to participate in treatment planning for youths receiving psychotropic medication. The psychiatrist must be available for emergency consultation 24 hours a day, 7 days a week.

(c) Clinical Staff Qualifications:

1. Qualified Professional – A physician licensed under Chapter 458 or 459, F.S.; a professional licensed under Chapter 490 or 491, F.S.; or a person meeting the qualifications in who is certified through a DCF recognized certification process of substance abuse treatment services and who holds, at a minimum, a bachelor's degree and meets all the requirements in (See Section 397.311 (25), F.S.)

2. Licensed Qualified Profession – a person who is a physician licensed under Chapter 458 or 459, F.S., a psychologist licensed under Chapter 490, F.S., or a mental health counselor, clinical social worker or marriage and family therapist licensed under Chapter 491, F.S.

3. Certified Addiction Professional: A person who is certified through a Department of Children and Families recognized certification process for substance abuse treatment services and who holds, at a minimum, a bachelor's degree. A person who is certified in substance abuse treatment services by a state-recognized certification process in another state at

the time of employment with a licensed service provider in this state must meet the requirements set forth in Section 397.311(25), F.S.

4. Substance Abuse Clinical Staff: A non-licensed substance abuse clinical staff person may provide substance abuse services in a DJJ residential commitment program only as an employee of a service provider licensed under Chapter 397 or in facility licensed under Chapter 397, Florida Statutes as specified in paragraph 65D-30.003(15)(a), or (b), F.A.C. (12-12-05). The non-licensed substance abuse clinical staff person must hold a Bachelor's degree from an accredited university or college with a major in psychology, social work, counseling or related human services field and meet the training requirements provided in Chapter 65D-30, F.A.C. (12-12-05) and work under the direct supervision of a qualified professional under Section 397.311(25), F.S.

5. Licensed Mental Health Professional: A psychiatrist licensed under Chapter 458 or 459, F.S., who is board certified in Child and Adolescent Psychiatry or Psychiatry by the American Board of Psychiatry and Neurology or has completed a training program in Psychiatry approved by the American Board of Psychiatry and Neurology for entrance into its certifying examination, a psychologist licensed under Chapter 490, F.S., a mental health counselor, clinical social worker or marriage and family therapy licensed under Chapter 491, F.S., or a psychiatric nurse as defined in Section 394.455(23), F.S.

6. Mental Health Clinical Staff Person: A mental health clinical staff person, if not otherwise licensed, must have, at a minimum, a Bachelor's degree from an accredited university or college with a major in psychology, social work, counseling or a related human services field. Related human services field is one in which major course work includes the study of human behavior and development, counseling and interviewing techniques, and individual, group or family therapy.

7. A non-licensed mental health clinical staff person providing mental health services in the program must meet one of the following qualifications and comply with d.

a. Hold a master's degree from an accredited university or college in the field of counseling, social work, psychology, or related human services field; or

b. Hold a bachelor's degree from an accredited university or college in the field of counseling, social work, psychology or related human services field and have two years experience working with (e.g., assessing, counseling, treating) youths with serious emotional disturbance or substance abuse problems; or

c. Hold a bachelor's degree from an accredited university or college in the field of counseling, social work, psychology or related human services field and have 52 hours of pre-service training prior to working with youths. The 52 hours of pre-service training must include a minimum of 16 hours of documented training in their duties and responsibilities. When pre-service training has been successfully completed, the

non-licensed person may begin working with youths, but must be trained for one year by a mental health clinical staff person who holds a master's degree. Pre-service training must cover, at a minimum: basic counseling skills, basic group skills, program philosophy, therapeutic milieu, behavior management, client rights, crisis intervention, early intervention and de-escalation, documentation requirements, normal and abnormal adolescent development and typical behavior problems.

d. Non-licensed mental health clinical staff person must work under the direct supervision of a licensed mental health professional. Direct Supervision means that the licensed mental health professional has at least one hour per week of on-site face-to-face interaction with the non-licensed mental health clinical staff person for the purpose of overseeing and directing (as permitted by law within his or her State of Florida licensure) the mental health services that the non-licensed mental health clinical staff person is providing in the facility. The licensed mental health professional must assure that mental health clinical staff (whether licensed or non-licensed) working under their direct supervision are performing services that they are qualified to provide based on education, training and experience.

(d) Required Components.

1. Substance abuse screening at the time of admission;
2. Comprehensive substance abuse evaluation or updated evaluation;
3. Substance abuse treatment planning, updating and review;
4. Daily substance abuse services for each youth; (7 days of the week) provided by substance abuse clinical staff;
5. Individual, group and family substance abuse counseling; (substance abuse counseling provided to each youth at least 5 days of the week);
6. Psychiatric services as needed, and is required for youths receiving psychotropic medication A psychiatrist must be on-site bi-weekly to provide psychiatric evaluations, medication management and participate in treatment planning for youths receiving psychotropic medication;
7. Mental health evaluation and treatment for youths with co-occurring mental disorders;
8. Routine and Random urinalysis drug testing with positive tests followed by appropriate clinical intervention and sanctions. (Including drug screening upon the youth's initial intake into the program);
9. Crisis Intervention and Suicide Prevention services;
10. 24-hour response capability;
11. All provided services must be documented.

Specific Authority 985.4891, 985.645 FS. Law Implemented 985.4891(3) FS. History--New _____.

DEPARTMENT OF JUVENILE JUSTICE

Residential Services

RULE NOS.:	RULE TITLES:
63E-7.006	Quality of Life and Youth Grievance Process
63E-7.007	Youth Hygiene and Dress Code
63E-7.008	Facility and Food Services
63E-7.009	Behavior Management

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 33, No. 27, July 6, 2007 issue of the Florida Administrative Weekly.

63E-7.006 Quality of Life and Youth Grievance Process.

(1) A residential commitment program shall establish the expectation that staff will treat youth with dignity and respect, and the program shall provide a positive quality of life for its youth by providing, at a minimum, the following:

- (a) Shelter;
- (b) Safety and security;
- (c) Clothing;
- (d) Food;
- (e) Access to the Department of Children and Families' central abuse hotline addressed in Chapter 39, F.S., or if the youth is 18 years or older, the department's Central Communications Center that serves as the department's incident reporting hotline;

- (f) Healthcare;
- (g) Mental health and substance abuse services;
- (h) Educational and prevocational or vocational services;
- ~~(i)(+)~~ Opportunities for recreation and large muscle exercise;

- ~~(j)(+)~~ Opportunities for expression of religious beliefs;
- ~~(k)(+)~~ Visitation;

~~(l)(+)~~ Access to incoming mail and opportunities to send outgoing mail; and

~~(m)(+)~~ Telephone access.

(2) through (3) No change.

(4) A residential commitment program shall provide opportunities for youth to receive incoming emergency telephone calls from family members or his or her legal guardian and calls from the youth's JPO, ~~and~~ attorney of record and, if applicable, the dependency case manager. The program shall allow each youth to make outgoing calls to the JPO, ~~and~~ attorney of record and, if applicable, the dependency case manager. A written procedure that fosters family reunification and community reintegration shall specify youths' access to incoming calls from and outgoing calls to family and other persons.

(5) A residential commitment program shall establish written procedures specifying the process for youth to grieve actions of program staff and conditions or circumstances in the

program related to the violation or denial of basic rights. These procedures shall establish each youth's right to grieve and ensure that all youth are treated fairly, respectfully, without discrimination, and that their rights are protected.

(a) through (c) No change.

(d) The program shall provide grievance forms and accompanying instructions at locations throughout the facility so they are readily accessible to youth. When a youth requests assistance in filing a grievance, program staff shall assist the youth as needed. Program staff shall ensure that a youth requesting to file a grievance be given necessary forms and accompanying instructions and shall assist the youth in filing the grievance if needed.

(e) No change.

Specific Authority 985.64, 985.601(3)(a), 20.316 FS. Law Implemented 985.601(3)(a), 985.03(44), 985.441(1)(b) FS. History—New _____.

63E-7.007 Youth Hygiene and Dress Code.

(1) through (4) No change.

(5) A residential commitment program shall establish and enforce a dress code for youth.

(a) through (c) No change.

(d) The program shall establish an internal process to review and provide a timely response to a youth's request for exemption from the dress code based on a religious belief. The program shall accommodate a youth's validated religious belief unless it is determined that doing so would compromise the safe and secure operation of the program.

Specific Authority 985.64, 985.601(3)(a), 20.316 FS. Law Implemented 985.601(3)(a), 985.03(44), 985.441(1)(b) FS. History—New _____.

63E-7.008 Facility and Food Services.

(1) through (5) No change.

(6) The siting of any new facility or structure for the purpose of operating a residential commitment program shall be in accordance with the following:

(a) Local zoning codes and ordinances per Section 125.01, F.S.;

(b) Provisions as specified in Rule Titles 62 ~~and~~ 47, F.A.C. pertaining to new construction and site development;

(c) through (e) No change.

(f) Additional minimum requirements to include:

1. Sleeping quarters.

a. 35 square feet unencumbered space, defined as usable space that is not encumbered by furnishings or fixtures, per youth in the sleeping quarters, with at least one dimension of the unencumbered space no less than seven feet;

b. One partition for every four youth in shared sleeping areas; and

c. A bed, a mattress that meets the national fire safety performance requirements, a pillow, a desk, a chair or stool, and personal storage space for every youth.

2. 35 square feet per youth for dayroom and multi-purpose room activities;

3. 50 square feet outdoor recreational space per youth;

4. 56.25 square feet per youth for rooms used for educational purposes, with a classroom size based on a maximum of 16 youth;

5. Natural and artificial light to accommodate daily activities of the program;

6. Heating and air conditioning equipment with the capacity to maintain indoor temperatures between 68 and 75 degrees Fahrenheit ~~Temperatures in indoor living and work areas for summer and winter comfort zones;~~

7. Space to accommodate dining, individual counseling, group meetings and other activities involving youth and staff that are integral to the program design; and

8. A closed circuit television system that includes but is not limited to, a color digital recording device. The digital video recorder (DVR) must be capable of a minimum of 30 days recorded event storage within the hard drive, have a minimum setting of eight frames per second, have a minimum of 16 camera inputs, and be capable of remote viewing. All equipment must be surge protected and have a universal surge protector backup and be connected to an emergency power supply.

(7) through (9) No change.

(10) A residential commitment program shall use a cycle menu that, with the exception of any residential commitment program with a bed capacity of five or less beds, is reviewed and approved by a dietitian licensed pursuant to Chapter 468, F.S. The program shall provide each youth with at least three nutritionally balanced meals and one nutritional snack per day and shall:

(a) Serve at least two of the meals hot;

~~(b) Consider food flavor, texture, temperature, appearance and palatability when preparing and serving food;~~

~~(b)(e)~~ Provide youth special diets when prescribed for health reasons or when dictated by religious beliefs; and

~~(c)(d)~~ Not withhold food as a disciplinary measure.

(11) A residential commitment program that is a food service establishment or is included in a food service establishment as defined in Chapter 381, F.S., shall provide food services pursuant to Chapter 64E-11, Florida Administrative Code (F.A.C.):

(a) General: Rule 64E-11.001, F.A.C. (8-28-96)

(b) Definitions: Rule 64E-11.002, F.A.C. (7-14-03)

(c) Food Supplies: Rule 64E-11.003, F.A.C. (7-14-03)

(d) Food Protection: Rule 64E-11.004, F.A.C. (7-14-03)

(e) Personnel: Rule 64E-11.005, F.A.C. (7-14-03)

(f) Food Equipment and Utensils: Rule 64E-11.006, F.A.C. (7-14-03)

(g) Sanitary Facilities and Control: Rule 64E-11.007, F.A.C. (7-14-03)

(h) Other Facilities and Operations: Rule 64E-11.008, F.A.C. (3-15-98)

~~(i)(j)~~ Temporary Food Service Events: Rule 64E-11.009, F.A.C. (3-15-98)

~~(j)(k)~~ Procedure When Infection is Suspected: Rule 64E-11.011, F.A.C. (2-21-91)

~~(k)(l)~~ Manager Certification: Rule 64E-11.012, F.A.C. (7-14-03)

~~(l)(m)~~ Certificates and Fees: Rule 64E-11.013, F.A.C. (7-14-03)

(12) A private home that serves as a residential commitment placement, such as a family home, shall provide food services pursuant to Rule 64E-12.004, F.A.C.

Specific Authority 985.64, 985.601(3)(a), 20.316 FS. Law Implemented 985.601(3)(a), 985.03(44), 985.441(1)(b) FS. History—New _____.

63E-7.009 Behavior Management.

(1) Consistent with its treatment approach, a residential commitment program shall establish a behavior management system, utilizing evidence-based techniques, that is responsive to the unique characteristics of the program’s population. Only someone with training or experience in behavior management techniques or systems shall develop or modify a program’s behavior management system. A program’s behavior management system shall foster accountability for behavior and compliance with the residential community’s rules and expectations.

(2) A residential commitment program’s behavior management system shall be described in writing and designed to:

(a) Maintain order and security;

(b) Promote safety, respect, fairness, and protection of rights within the residential community;

(c) Provide constructive discipline and a system of positive and negative consequences to encourage youth to meet expectations for behavior;

(d) Provide opportunities for positive reinforcement and recognition for accomplishments and positive behaviors;

(e) Promote socially acceptable means for youth to meet their needs;

(f) Include a process that addresses the following and is conducted in a manner that accommodates the cognitive capacity of individual youth ~~whereby~~:

1. Staff explain to the youth the reason for any sanction imposed;

2. The youth is given an opportunity to explain his or her behavior; and

3. Staff and the youth discuss the behavior's impact on others, reasonable reparations for harm caused to others, and alternative acceptable behaviors;

(g) Promote dialogue and peaceful conflict resolution;

(h) Minimize separation of youth from the general population; and

~~(i)(j) Complement the performance planning process, including coordination with any individual behavior plan when applicable. A copy of an individual behavior plan for any youth who has been identified as a client of the Agency for Persons with Disabilities will be provided to that agency.~~

(3) A residential commitment program's behavior management system shall not:

(a) Be used solely to increase a youth's length of stay;

(b) Be used to deny a youth basic rights or services to include regular meals, clothing, sleep, physical or mental health services, educational services, exercise, correspondence, and contact with his or her parents or legal guardian, attorney of record, JPO, ~~or~~ clergy and, if applicable, the dependency case manager;

(c) Promote the use of group discipline;

(d) Allow youth to sanction other youth; or

(e) Include disciplinary confinement wherein a youth is isolated in a locked room as discipline for misbehavior.

(4) No change.

~~(5) A moderate-risk, high-risk, or maximum-risk residential commitment program with a bed capacity of 50 beds or more may designate a living unit within the facility as a behavior management unit. The purpose of a behavior management unit is to provide a treatment environment that provides opportunities for youth to make positive changes in behavior that will facilitate progress in his or her overall treatment in the program. Any behavior management unit shall be designed and operated as follows: A moderate-risk, high-risk, or maximum-risk residential commitment program with a bed capacity of 50 beds or more may establish a behavior management unit to deal with a youth's misbehavior when less restrictive interventions have proven ineffective or are deemed unreasonable for the circumstances. For purposes of this rule, a behavior management unit is a designated living area within the facility that enables the program to separate from the general population those youth whose inappropriate behavior significantly disrupts the program's residential community, endangers the safety of staff and other youth, or threatens major destruction of property. The behavior management unit may be secure with locking exit doors, but shall not be comprised of secure rooms wherein youth are kept in lock-down status.~~

(a) The program shall document the following before a youth is placed in a behavior management unit:

1. The youth continues to demonstrate a pattern of maladaptive behavior that is highly disruptive to his or her responsivity to treatment, as well as other youths' ongoing

treatment, after the program has documented attempts to address the behavior using less restrictive alternative intervention strategies that have proven to be ineffective;

2. The youth is assessed and it is determined that he or she is not a danger to self and there are no identified mental health, physical health or other factors that contraindicate placement; and

3. At least two members of the youth's treatment team recommends the youth's placement in the behavior management unit, and the program director approves the placement or, in his or her absence, a program management level staff person designated by the program director grants approval.

~~(a) If a youth is assessed and it is determined that he or she is not a danger to self and there are no identified mental health, physical health or other contraindicating factors, a supervisor may approve placing a youth in the behavior management unit as a result of one or more of the following serious behavioral problems:~~

~~1. Physically assaulting another youth or staff member;~~

~~2. Leading, directing, or inciting other youth to riot or escape;~~

~~3. Attempting to escape (or escaped and is returned to the program);~~

~~4. Inflicting major property destruction; and~~

~~5. Repeatedly violating rules of the program.~~

~~(b) A behavior management unit's bed capacity shall not exceed 15. The unit may be secure with locking exit doors, but shall not be comprised of secure rooms wherein youth placed in the unit are kept in lock-down status. Sleeping rooms for youth shall have a minimum of 35 square feet of unencumbered space and shall meet the following specifications:~~

~~1. Solid core hardwood or metal door with a shatter-resistant observation window;~~

~~2. Vents not easily accessible from the toilet, sink or bed that are covered with small mesh or a metal plate (holes no larger than 3/16 inch) with no edges exposed;~~

~~3. A mattress that meets national fire safety performance requirements and that is suitable for use on the floor or a suicide-resistant bed;~~

~~4. Recessed light fixtures covered with shatter-resistant material or alternative lighting reviewed and approved by the department;~~

~~5. Shatter-resistant windows or, if glass windows that are not shatter resistant, covered with security-rated screens or other materials that prevent access to the glass;~~

~~6. No electrical outlets; and~~

~~7. Electrical switches located outside the sleeping rooms or covered and secured if located inside the rooms.~~

(c) The staff-to-youth ratio in a behavior management unit shall be at least that provided in the general population and sufficient to operate the unit safely and securely. Staff whose regular assignment is to work in the behavior management unit shall be trained in implementation of the program's behavior management system, as well as specific intervention strategies as needed to implement the behavioral goals for each youth in the unit. Staff assigned to the unit shall have specialty training in behavior management and behavior modification techniques.

(d) The unit shall provide a treatment environment that focuses specifically on youths' maladaptive behavior and provides opportunities for the youth to make positive changes in behavior that facilitate progress in their overall treatment. Additionally, the program shall provide basic rights, care and services to any youth in a behavior management unit consistent with the other sections of this rule chapter. Sleeping rooms for youth shall have a minimum of 35 square feet of unencumbered space and shall meet the following specifications:

1. ~~Solid core hardwood or metal door with a shatter-resistant observation window;~~
2. ~~Vents not easily accessible from the toilet, sink or bed that are covered with small mesh or a metal plate (holes no larger than 3/16 inch) with no edges exposed;~~
3. ~~A security rated, fire retardant plastic mattress suitable for use on the floor or a suicide resistant bed;~~
4. ~~Recessed light fixtures covered with shatter-resistant material or alternative lighting reviewed and approved by the department;~~
5. ~~Shatter-resistant windows or, if glass windows that are not shatter resistant, covered with security-rated screens or other materials that prevent access to the glass;~~
6. ~~No electrical outlets; and~~
7. ~~Electrical switches located outside the sleeping rooms or covered and secured if located inside the rooms.~~

(e) Consistent with the cognitive capacity of each youth placed in the behavior management unit, staff shall engage the youth in a process as follows:

1. ~~(e) Staff shall discuss with the youth the pattern of maladaptive behavior that resulted in explain to the youth the reasons for placement in the behavior management unit well as the and discuss with the youth consequences of repetition of the maladaptive behavior, alternative acceptable behaviors, harm caused to others as a result of the maladaptive behavior and possible reparations.~~

2. ~~(f) Staff shall advise the youth that of criteria for release from the behavior management unit is based upon his or her, including achievement of short-term goals established by the treatment team to address maladaptive behaviors. Staff shall also explain that making positive behavior changes while in the behavior management unit will help him or her progress in the overall program.~~

~~(g) At a minimum, the program shall provide youth with the following while they are placed in the behavior management unit:~~

1. ~~Regular meals;~~
2. ~~Clean clothing and linen;~~
3. ~~Personal hygiene;~~
4. ~~Educational services and other treatment activities associated with attainment of short term goals for release from the unit;~~
5. ~~At least one hour of large muscle physical exercise daily; and~~
6. ~~Telephone, correspondence, and visitation contact with the attorney of record, JPO, clergy and parents or guardian.~~

~~(f)(h) Reviews and Release.~~

1. ~~The youth's treatment team shall review the case within 72 hours of the youth being placed in a behavior management unit. If the treatment team decides to continue the youth's placement in the unit, the team shall develop short-term goals to assist the youth with accountability for behavior and changing or controlling maladaptive behaviors. The youth shall be present when the treatment team meets and given an opportunity to give input.~~

2. ~~Release from the behavior management unit is contingent upon a youth's completion of his or her behavioral goals. While the youth is in the behavior management unit, the treatment team may revise the youth's behavioral goals to assist him or her in changing the targeted pattern of maladaptive behavior and facilitate release from the unit.~~

3. ~~2. If the youth remains in the behavior management unit for 14 days, the treatment team shall review the youth's progress in attaining the short-term goals to and determine whether the youth is to be released or placement continued.~~

4. ~~3. Every 72 hours that the youth remains in the behavior management unit after the 14-day review, the treatment team shall review the youth's progress toward meeting his or her behavioral goals and recommend continued placement or release. At this stage, continued placement requires approval of the program director or, in his or her absence, a management level staff person designated by the program director his or her designee.~~

5. ~~4. If possible, the youth shall participate in all treatment team reviews, but if not, a representative of the treatment team shall discuss review findings with the youth.~~

6. ~~(j) The program director or, in his or her absence, a management level staff person designated by the program director, may approve release of a youth from the behavior management unit at any time it is determined that continued placement would be detrimental to the youth's well being. The program shall release a youth from the behavior management unit at any time it is determined that continued placement would be detrimental to the youth's well being or at the discretion of the program director or his or her designee.~~

(g)(k) Mechanical restraints may be used in the behavior management unit only as a last resort and any use shall be pursuant to Rule 63H-1.005, F.A.C., and documented pursuant to Rule 63H-1.007, F.A.C.

(h)(4) A program with a behavior management unit shall establish a system of documentation and record maintenance to include, at a minimum, the following:

1. Ongoing log of placements, including the name of each youth placed, date of placement, date of release, and the name of the program director or designee who approved the placement approving supervisor;
2. Documentation of treatment team meetings and reviews while the youth is in the behavior management unit, including initial short-term goals and any subsequent modifications, review date and signatures of participants, description of the youth's progress, and recommendations; and
3. Documentation of the program director's or his or her designee's approval of a recommendation for continued placement resulting from any 72-hour review conducted after the youth's 14th day in the unit.

Specific Authority 985.64, 985.601(3)(a), 20.316 FS. Law Implemented 985.601(3)(a), 985.03(44), 985.441(1)(b) FS. History--New _____.

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NO.: RULE TITLE:
64B3-5.0011 Definitions

NOTICE OF CORRECTION

Notice is hereby given that the following change has been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in the September 14, 2007, issue of the Florida Administrative Code, in Vol. 33, No. 37. The change is as follows:

The Notice of Change published on September 28, 2007, in this rule was published in error.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Joe Baker, Jr., Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

DEPARTMENT OF HEALTH

Board of Optometry

RULE NO.: RULE TITLE:
64B13-4.001 Examination Requirements

NOTICE OF WITHDRAWAL

Notice is hereby given that the above rule, as noticed in Vol. 33, No. 34, August 24, 2007 issue of the Florida Administrative Weekly has been withdrawn.

DEPARTMENT OF HEALTH

Board of Pharmacy

RULE NO.: RULE TITLE:
64B16-27.700 Definition of Compounding

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 30, No. 50, December 10, 2004 issue of the Florida Administrative Weekly.

The change is in response to written comments submitted by the staff of the Joint Administrative Procedures Committee. The changes are as follows:

1. Subsection (3) will be added to the rule and shall read as follows:

(3) Office use compounding. "Office use" means the provision and administration of a compounded drug to a patient by a practitioner in the practitioner's office or by the practitioner in a health care facility or treatment setting, including a hospital, ambulatory surgical center, or pharmacy. A pharmacist may dispense and deliver a quantity of a compounded drug to a practitioner for office use by the practitioner in accordance with this section provided:

(a) The quantity of compounded drug does not exceed the amount a practitioner anticipates may be used in the practitioner's office before the expiration date of the drug;

(b) The quantity of compounded drug is reasonable considering the intended use of the compounded drug and the nature of the practitioner's practice;

(c) The quantity of compounded drug for any practitioner and all practitioners as a whole, is not greater than an amount the pharmacy is capable of compounding in compliance with pharmaceutical standards for identity, strength, quality, and purity of the compounded drug that are consistent with United States Pharmacopoeia guidelines and accreditation practices.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Rebecca Poston, Executive Director, Board of Pharmacy, 4052 Bald Cypress Way, Bin #C04, Tallahassee, Florida 32399-3254.

FLORIDA HOUSING FINANCE CORPORATION

RULE NOS.:	RULE TITLES:
67-58.001	Purpose and Intent
67-58.002	Definitions
67-58.003	Application and Selection Procedures for Projects
67-58.006	General Program Procedures and Restrictions
67-58.015	Supplemental Loans for Green Building
67-58.050	Construction Disbursements

- 67-58.080 Terms of the Loan to Applicants
 - 67-58.090 Disbursement of Funds, Draw Requests, and Construction Loan Servicing
 - 67-58.100 Terms of the Loan to Eligible Persons
- NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 33, No. 39, September 28, 2007 issue of the Florida Administrative Weekly.

The changes are in response to written comments submitted by the staff of the Joint Administrative Procedures Committee and written comments received in response to the rule hearing on October 22, 2007. The changes are as follows:

PART I ADMINISTRATION

67-58.001 Purpose and Intent.

The purpose of this rule chapter is to establish the procedures by which the Corporation shall administer the Application process, credit underwriting and loan servicing of the Community Workforce Housing Innovation Pilot (CWHIP) Program (~~CWHIP~~) pursuant to Section 420.5095, F.S.

Specific Authority Section 420.5095 FS. Law Implemented Section 420.5095 FS. History—New 12-17-06, Amended _____.

67-58.002 Definitions.

(1) through (5) No change.

(6) “Applicant” means an entity seeking a loan from Florida Housing for the New Construction or Rehabilitation of housing under CWHIP which is a party to member of the Public-Private Partnership and has been designated by the Public-Private Partnership as having financial responsibility and which will execute all loan documents and will have the authority at closing to encumber the Project.

(7) through (21) No change.

~~(22) “Essential Services Personnel” means persons in need of affordable housing who are employed in occupations or professions in which they are considered essential services personnel, as defined by each county and eligible municipality within its respective local housing assistance plan pursuant to Section 420.9075(3)(a), F.S. For the purposes of CWHIP, Essential Services Personnel must meet the income requirements set forth in the definition of Workforce Housing.~~

(23) through (34) renumbered (22) through (33) No change.

~~(35) “Public-Private Partnership” means any form of business relationship entity that includes substantial involvement of at least one county, one municipality, or one public sector entity, such as a school district or other unit of local government in which the Project is to be located, and at least one private sector for-profit or not-for-profit business or charitable entity, and may be any form of business relationship entity, including a joint venture or contractual agreement.~~

(36) through (38) renumbered (34) through (36) No change.

~~(37)(39) “Scattered Sites” for a single rental Project means a Project consisting of real property in the same county (i) any part of which is not contiguous (“non-contiguous parts”) or (ii) any part of which is divided by a street or easement (“divided parts”) and (iii) it is readily apparent from the proximity of the non-contiguous parts or the divided parts of the real property, chain of title, or other information available to the Corporation that the non-contiguous parts or the divided parts of the real property are part of a common or related scheme of the Project. For a homeownership Project, “Scattered Sites” means a Project developed on non-contiguous sites of five (5) or more housing units developed on sites that are more than 2,000 feet apart and there are not more than four (4) housing units on any one site.~~

(40) through (41) renumbered (38) through (39) No change.

~~(42) “Workforce Housing” means housing affordable to Eligible natural persons or families whose total annual household income does not exceed 140 percent AMI, adjusted for household size, or 150 percent AMI, adjusted for household size, in Areas of Critical State Concern designated under Section 380.05, Florida Statutes (FS), for which the Legislature has declared its intent to provide affordable housing, and areas that were designated as Areas of Critical State Concern for at least 20 consecutive years prior to removal of the designation. For purposes of this rule, Workforce Housing includes affordable housing as defined in Section 420.0004 420.004, F.S.~~

Specific Authority Section 420.5095 FS. Law Implemented 420.5095 FS. History—New 12-17-06, Amended _____.

67-58.003 Application and Selection Procedures for Projects.

(1) When submitting an Application, Applicants must utilize the Community Workforce Innovation Pilot (CWHIP) Program (~~CWHIP~~) Application in effect at the Application Deadline.

(a) The CWHIP Application Package (“CWHIP-816 (11/26/07)”) is adopted and incorporated by reference herein, and consists of the forms and instructions obtained from the Corporation, for a fee, at 227 North Bronough Street, Suite 5000, Tallahassee, Florida 32301-1329 or available, without charge, on the Corporation’s Website under the Workforce Housing link labeled 2007 CWHIP, which shall be completed and submitted to the Corporation in accordance with this rule chapter in order to apply for the CWHIP Program.

(b) No change.

(2) through (8) No change.

(9) Notwithstanding any other provision of these rules, there are certain items that must be included in the Application and cannot be revised, corrected or supplemented after the

Application Deadline. Failure to submit these items in the Application at the time of the Application Deadline shall result in rejection of the Application without opportunity to submit additional information. Any attempted changes to these items will not be accepted. Those items are as follows:

(a) Parties ~~to~~ of the Public-Private Partnership; notwithstanding the foregoing, the parties ~~to~~ of the Public-Private Partnership may be changed only by approval of the Board after the Applicant has been invited to enter credit underwriting;

(b) Identity of the Applicant; notwithstanding the foregoing, the identity of the Applicant may be changed only by approval of the Board after the Applicant has been invited to enter credit underwriting;

(b) through (f) renumbered (c) through (g) No change.

~~(h)(g)~~ Submission of one “Original” original hard copy with the required number of photocopies of the Application by the Application Deadline;

~~(i)(h)~~ No change.

~~(j)(i)~~ The Application labeled “Original” Hard Copy must include a properly completed Certification Statement reflecting an original signature; and

~~(k)(j)~~ No change.

All other items may be submitted as cures pursuant to subsection (4) above.

With regard to paragraphs (a), (b), ~~(c)~~ and ~~(f)(e)~~ above, the Board shall consider the facts and circumstances of each Applicant’s request and any credit underwriting report, if available, prior to determining whether to grant the requested change.

(10) through (11) No change.

~~(12) When two or more Applications receive the same numerical score, the Applications will be ranked as outlined in the Application instructions.~~

(13) through (15) No change.

Specific Authority 420.5095 FS. Law Implemented 420.5095 FS. History–New _____.

67-58.006 General Program Procedures and Restrictions.

(1) Loans, excluding loans made pursuant to rule 67-58.015, F.A.C., shall be in an amount not to exceed 50 percent of the Total Project Cost attributable to the units set aside for Workforce Housing, or the minimum amount required to make the Project economically feasible, whichever is less, as determined by the Credit Underwriter.

(2) through (3) No change.

Specific Authority 420.5095 FS. Law Implemented 420.5095 FS. History–New _____.

67-58.015 Supplemental Loans for Green Building.

A supplemental loan is available to Applicants who have been awarded CWHIP funds under this application cycle and have committed to the requirements contained in Part III. C.3.b. and c. of the Application instructions. The supplemental loan is forgiven on a per set-aside unit basis as the certification is received for each set-aside unit. If certification is not obtained, the pro-rata supplemental loan amount attributed to that set-aside unit that did not receive certification becomes due and payable immediately with a penalty of 18 percent of the pro-rata amount.

Specific Authority 420.5095 FS. Law Implemented 420.5095 FS. History–New _____.

PART II MULTIFAMILY RENTAL PROJECTS

67-58.050 Construction Disbursements.

(1) CWHIP loan proceeds, including any supplemental loan pursuant to rule 67-58.015, F.A.C., shall be disbursed during the construction phase in an amount per Draw which does not exceed the ratio of the CWHIP loan to the Total Project Cost unless approved by the Credit Underwriter.

(2) through (8) No change.

Specific Authority 420.5095 FS. Law Implemented 420.5095 FS. History–New 12-17-06, Amended _____.

PART III HOMEOWNERSHIP PROJECTS

67-58.080 Terms of the Loans to Applicants.

(1) through (11) No change.

(12) Loans, excluding any supplemental loan pursuant to Rule 67-58.015, F.A.C., shall be assigned to Eligible Persons on a pro-rata basis with each set-aside unit closing.

(13) No change.

Specific Authority 420.5095 FS. Law Implemented 420.5095 FS. History–New 12-17-06, Amended _____.

67-58.090 Disbursement of Funds, Draw Requests, and Construction Loan Servicing.

(1) CWHIP loan proceeds, including any supplemental loan pursuant to Rule 67-58.015, F.A.C., shall be disbursed during the construction phase in an amount per Draw which does not exceed the ratio of the CWHIP loan to the Total Project Development Cost unless approved by the Credit Underwriter.

(2) through (8) No change.

Specific Authority Section 420.5095 FS. Law Implemented Section 420.5095 FS. History–New 12-17-06, Amended _____.

67-58.100 Terms of the Loans to Eligible Persons.

(1) through (7) No change.

(8) The Corporation will consider resubordinating its existing ~~second~~ mortgage loan to an Eligible Person to a first mortgage loan when a refinancing occurs. In making a

determination, the Corporation will review the following terms of the new transaction: loan type; term of the loan; interest rate; type of interest rate (variable or fixed); principal balance of the loan; reason for requesting subordination of the loan; and whether or not the terms of the new loan are beneficial to the Eligible Person. Eligible Persons requesting resubordination are subject to the following:

- (a) through (d) No change.
- (9) through (11) No change.

Specific Authority Section 420.5095 FS. Law Implemented Section 420.5095 FS. History—New 12-17-06, Amended _____.

Application and Instructions

The following changes were made to the Application Package – CWHIP-816 (11/26/07):

- Part II Applicant and Project Team:
 - Section A. Applicant: Deleted “Relationship to Applicant” in Developer information section
- Part III Project:
 - Section B. Unit Types: Added “Type of Unit, Rental, Condo, Townhome, SF Detached” in Unit Mix chart
 - Section C. Innovation: Revised scoring criteria in response to written comments received by FHFC
- Part IV Contributions:
 - Included waived Developer fees as an acceptable form of Contribution
 - Revised scoring criteria and calculation of points to include other forms of Contributions
- Part V Financing:
 - Section B. Leveraging: Clarified scoring criteria of leveraging range (no longer a tie-breaker)
 - Section C. Finance Documents: Clarified acceptable forms of documentation of Corporation funding commitments
 - Section D. Non-Corporation Funding Commitments: Clarified acceptable forms of documentation of Non-Corporation funding commitments
- Threshold Requirements: Revised Innovation threshold score from 67 to 60
- Ranking and Selection Criteria: Revised ranking and selection criteria
- Project cost Pro Forma: Deleted contradictory items:
 - “Supplemental Loan” line item in Rental Permanent Analysis section
 - “Supplemental Loan” line item in Homebuyer Permanent Affordability Analysis section

THE PERSON TO BE CONTACTED REGARDING THE CHANGES TO THE PROPOSED RULE IS: Bridget Warring, Homeownership Programs Manager, Florida Housing Finance Corporation, 227 North Bronough Street, Tallahassee, Florida 32301, (850)488-4197

FINANCIAL SERVICES COMMISSION

OIR – Insurance Regulation

RULE NO.: 69O-137.013
 RULE TITLE: Florida Hurricane Catastrophe Fund Assessment Information Gathering

NOTICE OF WITHDRAWAL

Notice is hereby given that the above rule, as noticed in Vol. 32, No. 26, June 30, 2006 issue of the Florida Administrative Weekly has been withdrawn.

FINANCIAL SERVICES COMMISSION

OIR – Insurance Regulation

RULE NOS.: 69O-171.002, 69O-171.008
 RULE TITLES: General Reporting Requirements Insurer Experience Reporting – Calendar Year Experience

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 33, No. 38, September 21, 2007 issue of the Florida Administrative Weekly.

The change is solely in 69O-171.002, .008 which will read:

(1) Forms incorporated by reference in Division Number 69O these rules are available on the Office’s website: <http://www.floridfs.com>.

~~(4)(a) Any insurer or insurer group which does not write at least 1/2 percent of the Florida market, based on written premiums, shall not be required to complete and submit to the Office the forms prescribed by Rule 69O-171.008, F.A.C. Instead of completing form OIR-308, “Calendar Year Experience” as adopted in Rule 69O-171.008, F.A.C., the insurer shall list each line of insurance that is less than 1/2 percent of the market and list the corresponding written premiums for each of these lines of insurance.~~

69O-171.008 Insurer Experience Reporting – Calendar Year Experience.

(1) Any insurer authorized to transact fire, homeowner’s, multiple peril, commercial multiple peril, medical malpractice, product liability, workers’ compensation, private passenger automobile liability, commercial automobile liability, private passenger automobile physical damage, commercial automobile physical damage, directors’ and officers’, or other liability insurance shall report, for each such line of insurance, the information required by Section 627.915(2), F.S., Section 627.915(5), F.S., or required by rule, on Form OIR-B1-308 (Rev. 07/03), “Calendar Year Experience”, data reporting form OIR-D0-308 (Revised 02/2007) “Florida Property and Casualty Insurance Calendar Year Experience”, ~~which is hereby incorporated by reference, and is available and is to be completed and submitted on the Office’s website: <http://www.fldfs.com/D14-308>.~~

The remainder of the rule reads as previously published.